FORM D

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

UNIFORM LIMITED OFFERING EXEMPTION

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR OMB APPROVAL
OMB Number: 3235-0076
Expires: April 30,2008
Estimated average burden
hours per response.....16.00

SEC USE ONLY								
Prefix Serial								
DA	TE RECEIV	ED						

Washington, DC

JAN 18 2008

Mail Processing

Section

(Preheck if this is an amendment and name has changed, and indicate change.) Name of Offering Private Placement of Limited Partnership Interests Rule 504 Rule 505 Rule 506 Section 4(6) Filing Under (Check box(es) that apply): Type of Filing: A. BASIC IDENTIFICATION DATA Enter the information requested about the issuer Name of Issuer (check if this is an amendment and name has changed, and indicate change.) Double Play Partners Limited Partnership Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Nut 1391 Main Street, Springfield, MA 01103 413 784-0990 Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone Nu (if different from Executive Offices) Brief Description of Business Investment Vehicle organized as a Massachusetts limited partnership Type of Business Organization limited partnership, already formed other (please specify): corporation

GENER	ΑL	INSTR	UCTI	ONS

business trust

Actual or Estimated Date of Incorporation or Organization:

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

Year

CN for Canada; FN for other foreign jurisdiction)

9191

🔽 Actual 📋 Estimated

MA

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:

limited partnership, to be formed

0 8

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

- ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer General and/or Managing Partner Full Name (Last name first, if individual) Eldaro Investors, LLC Business or Residence Address (Number and Street, City, State, Zip Code) 1391 Main Street, Springfield, MA 01103 Check Box(es) that Apply: ☐ Beneficial Owner General and/or Promoter Executive Officer Director Managing Partner Full Name (Last name first, if individual) Schwerin, Robert B. Business or Residence Address (Number and Street, City, State, Zip Code) 1391 Main Street, Springfield, MA 01103 Check Box(es) that Apply: ☐ Beneficial Owner ☐ Executive Officer General and/or Promoter Director Managing Partner Full Name (Last name first, if individual) Murphy, M. Eleanor Business or Residence Address (Number and Street, City, State, Zip Code) 1391 Main Street, Springfield, MA 01103 General and/or Check Box(es) that Apply: Beneficial Owner Executive Officer Director Managing Partner Full Name (Last name first, if individual) Boyle, Daniel P. Business or Residence Address (Number and Street, City, State, Zip Code) 1391 Main Street, Springfield, MA 01103 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)

					B. I.	NFORMATI	ON ABOU	r offeri	٧G				
1.	Has the	issuer solo	l, or does th	ne issuer in	ntend to se	II, to non-a	ccredited in	ivestors in	this offeri	ng?		Yes	No ⊭
	Answer also in Appendix, Column 2, if filing under ULOE.												
2. What is the minimum investment that will be accepted from any individual?										\$_50,000.00			
3.	3. Does the offering permit joint ownership of a single unit?									Yes	No 		
4.	Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.												
Ful	l Name (l	Last name	first, if indi	ividual)									
Bu	siness or	Residence	Address (N	lumber and	l Street, Ci	ty, State, Z	ip Code)						
Nai	me of Ass	sociated Br	oker or De	aler									
Sta	tes in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit I	Purchasers						
	(Check	"All States	s" or check	individual	States)					.,,,,			l States
	AL IL MT RI	AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	ID MO PA PR
Ful	ll Name (Last name	first, if ind	ividual)									
Bu	siness or	Residence	: Address (1	Number an	d Street, C	ity, State, 2	Zip Code)						
Na	me of Ass	sociated B	roker or De	aler									
Sta	tes in Wh	nich Persor	Listed Has	s Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All State:	s" or check	individual	States)	•••••	***************************************	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	*************	**************			l States
	AL IL MT RI	AK IN NE SC	IA NV SD	KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	MO PA PR
Ful	ll Name (Last name	first, if ind	ividual)									·
Bu	siness or	Residence	: Address (3	Number an	d Street, C	City, State, I	Zip Code)		<u>-</u>				
Na	me of Ass	sociated B	roker or De	aler									
Sta	ites in Wh	nich Persor	Listed Has	s Solicited	or Intends	to Solicit	Purchasers						
			s" or check						***************************************		*******************************	☐ AI	l States
	AL IL MT	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	MO PA PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

١.	sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\subseteq and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	S	\$
	Equity		\$
	Common Preferred		
	Convertible Securities (including warrants)	5	S
	Partnership Interests	5,132,000.00	\$_5,132,000.00
	Other (Specify)	S	\$
	Total	5,132,000.00	\$_5,132,000.00
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	6	\$ 5,132,000.00
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
		Type of	Dollar Amount
	Type of Offering	Security	Sold
	Rule 505		\$
	Regulation A		3
	Rule 504	•	\$
	Total		\$ 0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$
	Legal Fees		§ 625.00
	Accounting Fees		s
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)		\$
	Other Expenses (identify)		\$
	Total		s 625.00

	C. OFFERING PRICE, NUM	ABER OF INVESTORS, EXPENSES AND USE OF P	RUCEEDS	,	
	and total expenses furnished in response to Part C -	ering price given in response to Part C — Question 1 – Question 4.a. This difference is the "adjusted gross		\$5,131,375.00	
i.	each of the purposes shown. If the amount for a	roceed to the issuer used or proposed to be used for any purpose is not known, furnish an estimate and of the payments listed must equal the adjusted gross rt C — Question 4.b above.			
			Payments to Officers, Directors, & Affiliates	Payments to Others	
	Salaries and fees	[\$. 🗆 \$	
	Purchase of real estate	[<u> </u>	. 🗆 \$	
	Purchase, rental or leasing and installation of ma	achinery [¬ (□ \$	
		icilities			
	Acquisition of other businesses (including the veoffering that may be used in exchange for the as	alue of securities involved in this		_	
				· 	
				_	
	Other (specify): Investment of Proceeds of Of	fering in Securities		\$ 5,131,375.00	
			\$	s	
	Column Totals		\$ <u>0.00</u>	/ \$_5,131,375.00	
		Total Payments Listed (column totals added)			
		D. FEDERAL SIGNATURE			
sig	nature constitutes an undertaking by the issuer to fi	ne undersigned duly authorized person. If this notice turnish to the U.S. Securities and Exchange Commis accredited investor pursuant to paragraph (b)(2) of l	ssion, upon writte		
ss	uer (Print or Type)	Signature	Date ,		
Do	puble Play Partners Limited Partnership	Mreean Much	1/11/20	908	
٧a	me of Signer (Print or Type)	Title of Signer (Print or Type)			
۸.	Eleanor Murphy	Managing Member, Eldaro Investors LLC, Ge	neral Partner		

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	E. STATE SIGNATURE		
1.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification	Yes	No
	provisions of such rule?		X

See Appendix, Column 5, for state response.

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature	Date
Double Play Partners Limited Partnership	M Eleans Murphy	1/11/2008
Name (Print or Type)	Title (Print or Type)	•
M. Eleanor Murphy	Managing Member, Eldaro Investors LLC	, General Partner

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX 2 1 3 Disqualification Type of security under State ULOE and aggregate (if yes, attach Intend to sell offering price explanation of Type of investor and to non-accredited offered in state amount purchased in State waiver granted) investors in State (Part C-Item 1) (Part C-Item 2) (Part E-Item 1) (Part B-Item 1) Number of Number of Non-Accredited Accredited State Yes No Investors Amount **Investors** Amount Yes No ALΑK AZAR LP Interest 1 $\mathsf{C}\mathsf{A}$ \$100,000.0d × CO LP Interest CT1 \$1,000,000. DE DC 1 \$1,100,000. FL LP Interest $\mathbf{G}\mathbf{A}$ HI ID IL ΙN IA KS KY LA ME MD MA × LP Interest 2 \$2,000,000. ΜI MN MS

APPENDIX 2 3 4 1 Disqualification Type of security under State ULOE (if yes, attach Intend to sell and aggregate Type of investor and explanation of to non-accredited offering price offered in state amount purchased in State waiver granted) investors in State (Part C-Item 2) (Part E-Item 1) (Part B-Item 1) (Part C-Item 1) Number of Number of Accredited Non-Accredited Yes Amount No State No Investors Investors Amount Yes MO MT NE NV NH NJ NM LP Interest NY X \$932,000.00 NC ND OH OK OR PA RI SC SD TNTX UT VT VAWA wv WI

	APPENDIX										
l		2	3		4						
	to non-a investor	to sell accredited is in State 3-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	nd aggregate fering price Fered in state Type of investor and amount purchased in State				Disqualifica under State U (if yes, atta- explanation waiver gran (Part E-Item			
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No		
WY											
PR											

